

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)	Karen Hicks			
II. Name of lobbyist's pa	rtnership, firm or cor	poration, if ar	ny:	
Civix Strategy Group	, LLC			
(Name of	f partnership, firm or corpo	oration)		
114 North Main Stree	et, STE 203	Concord	NH	03301
Business Address: (Street)		(Town/City)	(State)	(Zip Code)
(603) <u>573-9661</u> (Telephone)	()	(Fax)	e-mail <u>Karen@</u> 0	Civixstrateygroup.com
	s: (Choose one – file so	()	ts for each client, OR you	ı may file a separate report for
reportable expense trans	actions which are not	attributable t	o any one client).	
All reportable transacti	ions occurring in the mo	onths prior to t	he reporting date relative t	to the following client:
Civix Strategy Group, LLC				
	all Name of Client as it ap	pears on the Lot	obyist Registration Form)	
<u>OR</u>				
All reportable transaction unrelated to any particular	ons by the lobbyist (inclication)	luding the lobb	oyist's family), or the lobby	ying firm listed below which are
_	pril 25, 2018 🛭	3/31/18	July 25, 2018 activity from 4/1/18 to 6/36	0/18
	ctober 31, 2018		January 30, 2019 activity from 10/1/18 to 12	
V. There have been no If this box is checked, comp Concord, NH 03301.	fees received and no olete just this form and	reportable submit it to the	transactions made since Secretary of State's Office	e, State House, Room 204,
VI. Check if additional re	eports are attached:			
	•	s, you must fil	e Addendum A– Fees and	d Expenses
If you have paid an hor Expense Reimbursement	norarium or reimbursed	expenses, you	must file Addendum B-	Report of Honorariums or
☐ If you, your firm, or yo	our family has made pol	itical contribu	tions, you must file Adder	ndum C-Political Contributions
Sworn Statement/Affirma I have read RSA 15, RSA 1 and complete to the best of	15-B, RSA 14-C and RS my knowledge and bel	SA 664 and herief.	eby swear or affirm that th	he foregoing information is true
(Signature of lobbyist)	rdus		4/25/18	
(Signature of loodyist) Karen Hicks			(RECEIVED
(Print Name of lobbyist)		··		APR 2 5 2018
				NEW HAMPSHIRE DEPARTMENT OF STATE

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Karen Hicks		
II. Name of lobbyist's partnership, firm or corporation, if any:		
Civix Strategy Group, LLC		
(Name of partnership, firm or corporation)		
III. Name of Client Civix Strategy Group, LLC	Date _	4/25/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, o	or public relations service
a) Total of all fees received in this reporting period	a) \$	1950.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ car)	0.00
c) Total of all fees received to date (Add lines a and b)	c) \$	1950.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	1950.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (e) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if may be filed aggregate expenses; (b) le: meals pu ss than \$10 ed with a va- orting period are of greate er than \$25, expense re	expenditures are made by d for the lobbyist(s)/firm total of all expenses paid the aggregate total of all rehased during a business that is given to the person lue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of but not greater than \$500 imbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$	1950.00
in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period	d) \$	1950.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	1950.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fe	es during this reporting
Paid to:	Amount	:
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
have read DCA 15 DCA 15 D are 1DCA CCA and 1 and	that the	foregoing information
have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm strue and complete to the best of my knowledge and belief.		
s true and complete to the best of my knowledge and belief.	4/25/	/18
s true and complete to the best of my knowledge and belief. (Signature of lobbyist)	4/25/	/18 (Datc)
s true and complete to the best of my knowledge and belief.		

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)K	aren Hicks				
II. Name of lobbyist's par	tnership, firm or corp	oration, if any:			
•		,			
Civix Strategy Group,	LLC nership, firm or corporation)				
(Name of parti	nership, firm or corporation)				
III. Name of Client Date					
Political Contributions					
			ter 664 paid on behalf of the		
client/lobbyist and lobbyin	g firm, indicate the fol	lowing:			
Full name of candidate:	Cavanaugh	Kevin			
	(Last Name)	(First Name)	(Middle Name/Initial)		
Amount of contribution \$	100.00	Office Candidate is	s Seeking Senate		
I mildent of contribution \$					
Full name of candidate:	Woodburn	Jeff (First News)	(Middle Name/Initial)		
	(Last Name)	(First Name)	(Middle Name/initial)		
Amount of contribution \$	250.00	Office Candidate is	Seeking Senate		
If the contribution is an in-kir actual cost of the in-kind cont enter an estimated value and t	tribution on the line abov	a description of the good re for amount of contribu	ls or services provided, and enter the ution. If the actual cost is not known		
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)		
Full name of candidate: Amount of contribution \$	(Last Name)	(First Name) Office Candidate is			

(If more than three contributions were made, report addition	nal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 an is true and complete to the best of my knowledge	nd hereby swear or affirm that the foregoing informate and belief.
(Signature of lobbyist)	(Date)
(Ciamatana - C1-1.1. * 4)	